

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

Enterprise City School District
502 E. Watts Street
Enterprise, AL 36331-1790

COMPLETE THIS SECTION ON DELIVERY**A. Signature**

Gladys Welch Agent
 Addressee

B. Received by (Printed Name)

Gladys Welch

C. Date of Delivery

7/17/06

D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

06 W 548
 310

3. Service Type

Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted

Yes

2. Article Number

(Transfer from service)

7005 1820 0002 3461

Domestic Return Receipt

102595-02-M-1540

2011 February 2004